

Recognizing the Symptoms

The supervisor does not need expert knowledge about substance abuse to intervene positively when an employee's work is affected. But it is essential to remain alert to changes in work patterns and behavior and to be able to document signs of failing performance.

The following symptoms are common among substance-abusing employees; however, these signs do NOT necessarily indicate that an employee has a substance abuse problem.

What Are the Warning Signs?

- 1 Performance Deteriorates**
 - Inconsistent work quality and lowered productivity. Erratic work pace, deteriorated concentration, signs of fatigue.
 - Increased mistakes, carelessness, errors in judgment.
- 2 Poor Attendance and Absenteeism**
 - Absenteeism and lateness accelerate, particularly before and after weekends.
 - Often the complaint is of flu, stomach distress, sore throat, headache, or other vaguely defined illnesses.
 - Early departures and extended lunch periods become more frequent. Unexplained disappearances from the job occur more often.
- 3 Attitude and Physical Appearance Change**
 - Details are often neglected, assignments handled sloppily.
 - Others are blamed for the individual's own shortcomings.
 - Colleagues and supervisors are often deliberately avoided.
 - Personal appearance and ability to get along with others deteriorate.
 - Colleagues may show signs of poor morale and reduced productivity, often because of the time spent "covering up" for the substance abuser.
- 4 Health and Safety Hazards Increase**
 - A higher than average accident rate.
 - Careless handling and maintenance of machinery and equipment.
 - Taking needless risks to raise productivity following periods of low achievement.
 - Disregard for safety of colleagues.
- 5 Domestic Problems Emerge**
 - Complaints about problems in the home and with the family increase. There is talk of separation, divorce, or delinquent behavior in children.
 - Financial problems recur with frequency.

It is impossible to note all the behavioral symptoms that may occur in this process of deterioration or to define precisely their sequence and severity. They may appear singly or in combination, and they may very well signify problems other than substance abuse.

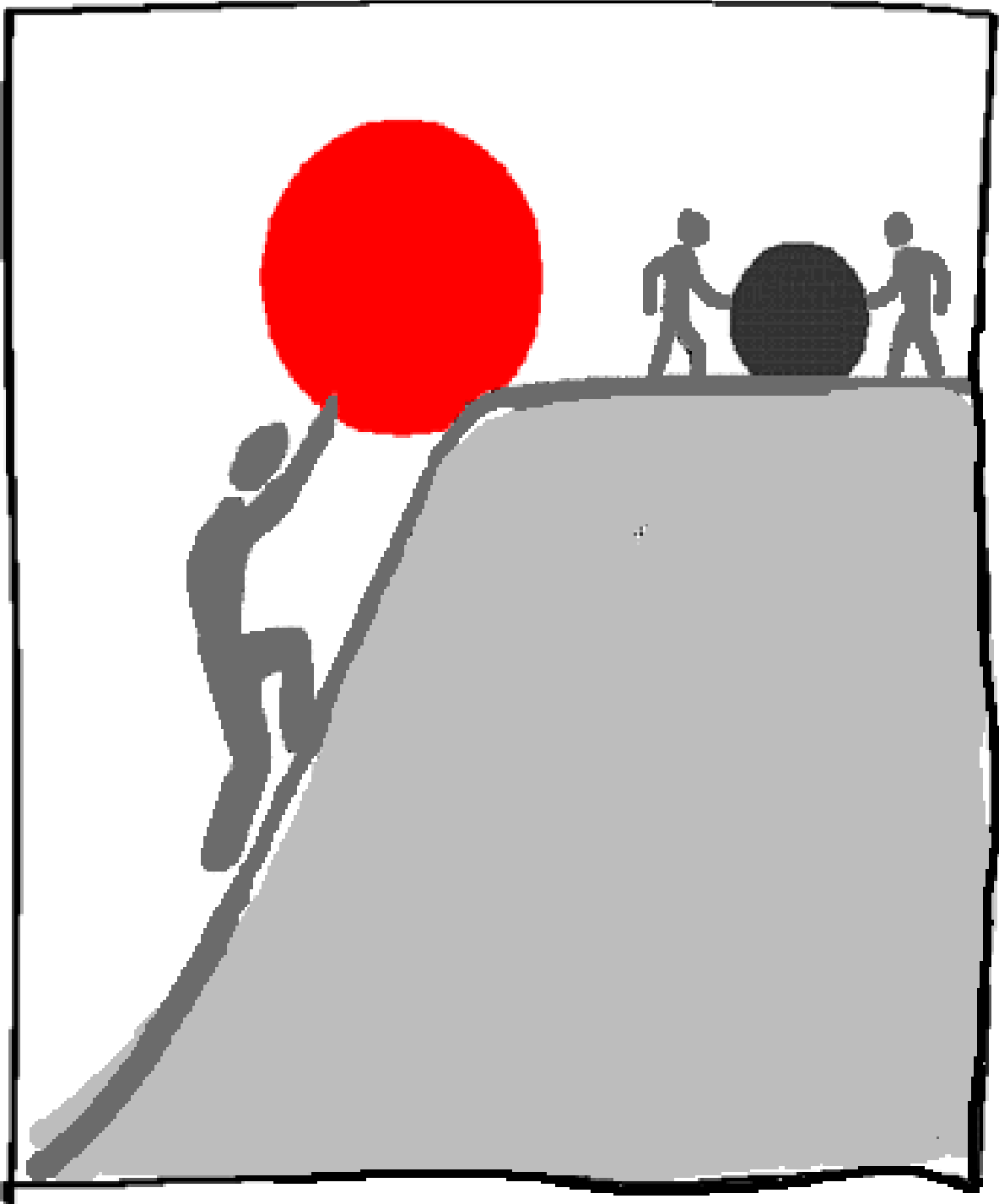
Clinical diagnosis is not the business of the supervisor. But when behavior changes affect the individual's work performance, the supervisor should be prepared to detect change and do something about it.

To ignore the situation or to cover it up can only increase the cost to the business—in money and lives—and it can only speed up the total deterioration of the abuser.

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When and How To Intervene



The Principles of Intervention

- 1 Stick to the facts about duty and performance.**
- 2 Have all the documents available; don't rely on memory.**
- 3 Explain all the consequences if performance expectations are not met.**
- 4 Be supportive, honest, and above all, firm.**
- 5 No one likes suggesting a friend or a colleague has a problem.** But the critical point to remember is that the supervisor is not helping the individual abuser or the business by neglecting the problem.
 - **When substance abuse begins** to impair the performance of one's on-the-job functions, the expertise and training of the supervisor come into play. The decision to intervene should be based on deteriorating or unacceptable job performance.
 - **The key** to successful confrontation is to stick to the facts as they affect work performance and to avoid emotional involvement. This is difficult but essential.
 - **Do not attempt** to discuss drinking habits or other drug use with the user; you are likely to emerge as the loser.
 - **Maintain control** of the conversation and stick to what you know and can document: instances of unacceptable behavior such as absenteeism, accidents, mistakes, or failure to meet objectives and deadlines.
 - **Have the documentation** in front of you so that you are sure of the facts and are not likely to be dissuaded. Do not rely on your memory.
 - **Stay clear** of discussing substance abuse specifically. This only shifts the focus to the user's area of expertise, and you risk losing control of the interview.
 - **The first interview** should be relatively low key, in the tone of a job evaluation, with the supervisor or executive pointing out the areas of deficiency and offering to help in solving problems.
 - **The individual** will rarely admit that alcohol or some other substance abuse is at the root of, or is contributing to, the problem. Unless there is strong supporting evidence that drugs are involved, the supervisor should not overlook the possibility that drug abuse may not be the major cause of the work deficiency.
 - **The individual**, during the course of this discussion, should be made fully aware of the organizational and departmental policies regarding treatment (i.e., if and at what point treatment becomes mandatory), the consequences of failing to meet objectives, and the consequences of violating regulations.
 - **In some cases**, the threat to one's job and career may be enough to motivate action.
 - **When the abuser finally agrees** or is obliged to accept treatment, the supervisor should make the appointment, offer encouragement, express optimism for the outcome, and schedule followup interviews to discuss progress.

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